



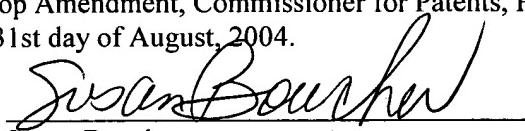
PATENT
Attorney Docket No. PXE-001C1
(8037/2)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Boyd *et al.* CONF. NO.: 6535
SERIAL NO.: 10/764,328 GROUP NO.: 1614
FILING DATE: January 23, 2004 EXAMINER: Not yet assigned
TITLE: Methods and Composition for Diagnosing and Treating
Pseudoxanthoma Elasticum and Related Conditions

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 31st day of August, 2004.



Susan Boucher

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. Check in the amount of \$183.00;
4. Supplemental Preliminary Amendment (9 pgs.);
5. Supplemental Information Disclosure Statement (2 pgs.);
6. Form PTO-1449 (2 pgs.),
7. Copies of cited references C6-C22; and a
8. Return receipt postcard.



**TRANSMITTAL
FORM**

TRANSMITTAL FORM	Application Serial Number	10/764,328
	Filing Date	January 23, 2004
	First Named Inventor	Boyd
	Group Art Unit	1614
	Examiner Name	Not yet assigned
	Attorney Docket No.	PXE-001C1
	Patent No.	Not applicable
	Issue Date	Not applicable

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate)
<input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> Supplemental Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return receipt postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of SIDS Citations (C6-C22)	<input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	

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Respectfully submitted,

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**EE TRANSMITTAL
FY 2004**

SHP 02 2004

<i>Complete if Known</i>	
Application Serial Number	10/764,328
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First Named Inventor	Boyd
Group Art Unit	1614
Examiner Name	Not yet assigned
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